


 PATENT (U.S.A.)
 ATTORNEY'S DOCKET NO.: 81476-255373

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 DECLARATION
 ORIGINALLY FILED

 X ORIGINAL
 CONTINUATION
 DIVISIONAL

As a below named inventor, I declare that the information given herein is true, that I believe that I am the original, first and sole inventor if only one name is listed at 1 below, or a joint inventor if plural inventors are named below at 1-4, of the invention entitled: METHOD FOR THE ISOLATION OF STEM CELLS BY IMMUNO-LABELING WITH HLA/MHC GENE PRODUCT MARKER

Which is described and claimed in:

the attached specification or

X the specification in application Serial No. 09/852,458 filed May 9, 2001
 as amended on _____

and for which a patent is sought, and that my residence, post office address and citizenship are as stated below next to my name.

I acknowledge my duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION NUMBER	DATE OF FILING Month Day Year	PRIORITY CLAIMED UNDER
			35 U.S.C. 119
			YES _ NO _
			YES _ NO _

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)

(Filing Date)

(Status)

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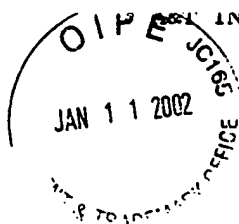
Send correspondence to:
PILLSBURY WINTHROP LLP
725 South Figueroa, Suite 2800
Los Angeles, CA 90017-5406

DIRECT TELEPHONE CALLS TO:
Richard H. Zaklen
(213) 488-7100

1	LAST NAME <i>Los Angeles California</i> AVITAL	FIRST NAME ITZHAK	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
	Post Office Address <i>Franklin Av' 7200, Apt 222, Los Angeles, CA 90046</i>				CITIZENSHIP ISRAEL
2	LAST NAME ARNAOUT	FIRST NAME WALID	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
	Post Office Address				CITIZENSHIP
3	LAST NAME INDERBITZIN	FIRST NAME DANIEL	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
	Post Office Address				CITIZENSHIP

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF ITZHAK AVITAL <i>Itzhak Avital</i>	SIGNATURE OF WALID ARNAOUT
DATE <i>12/7/01</i>	DATE
SIGNATURE OF DANIEL INDERBITZIN	
DATE	



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Los Angeles, CA 90017-5406

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Richard H. Zaitlin
(213) 488-7100

1	LAST NAME AVITAL	FIRST NAME ITZHAK	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
	Post Office Address				CITIZENSHIP ISRAEL
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	Post Office Address				CITIZENSHIP
3	LAST NAME INDERBITZIN	FIRST NAME DANIEL	MIDDLE NAME	Residence: CITY ZURICH	STATE or COUNTRY SWITZERLAND
	Post Office Address REGULASTRASSE 15; CH-8046 ZURICH; SWITZERLAND				CITIZENSHIP SWISS

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF ITZHAK AVITAL	SIGNATURE OF WALID ARNAOUT
DATE	DATE
SIGNATURE OF DANIEL INDERBITZIN 	
DATE <i>December 7th 2001</i>	



PATENT (U.S.A.)
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(Application Serial No.)

(Filing Date)

(Status)

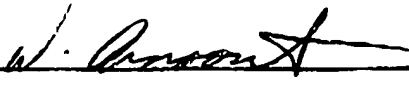
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(213) 488-7100

1	LAST NAME AVITAL	FIRST NAME ITZHAK	MIDDLE NAME	Residence: CITY STATE or COUNTRY
	Post Office Address			CITIZENSHIP ISRAEL
2	LAST NAME ARNAOUT	FIRST NAME WALID	MIDDLE NAME	Residence: CITY Calabasas, California STATE or COUNTRY
	Post Office Address 4030 Leighton Point Rd., Calabasas, CA 91301			CITIZENSHIP LEBANON
3	LAST NAME INDERBITZIN	FIRST NAME DANIEL	MIDDLE NAME	Residence: CITY STATE or COUNTRY
	Post Office Address			CITIZENSHIP

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

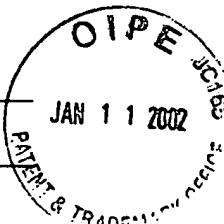
SIGNATURE OF ITZHAK AVITAL	SIGNATURE OF WALID ARNAOUT 
DATE	DATE 12/10/01
SIGNATURE OF DANIEL INDERBITZIN	
DATE	

Applicant or Patentee: ITZHAK AVITAL, et al.

Serial or Patent No.: _____

Filed or Issued: _____

For: METHOD FOR THE ISOLATION OF STEM CELLS BY IMMUNO-LABELING WITH HLA/MHC GENE
PRODUCT MARKER



Docket No. 81476-255373

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MAR 27 2002

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VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 C.F.R. 1. 27 (c) – NONPROFIT ORGANIZATION)

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION CEDARS-SINAI MEDICAL CENTER

ADDRESS OF ORGANIZATION 8700 Beverly Boulevard, Los Angeles, CA 90048

TYPE OF ORGANIZATION

- ☐ University or Other Institution of Higher Education
☒ Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c)(3))
☐ Nonprofit Scientific or Educational Under Statute of State of the United States of America
Name of State _____ Citation of Statute _____
☐ Would Qualify as Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c)(3)), if
located in the United States of America
☐ Would Qualify as Nonprofit Scientific or Educational Under Statute of State of the United States of
America if Located in the United States of America
Name of State _____ Citation of Statute _____

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization, as defined in 37 CFR 1.9(e), for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, with regard to the invention entitled METHOD FOR THE ISOLATION OF STEM CELLS BY IMMUNO-LABELING WITH HLA/MHC GENE PRODUCT MARKER by inventor(s) ITZHAK AVITAL, et al. described in:

- ☒ the specification filed herewith
☐ application Serial No. _____, filed _____
☐ patent No. _____, issued _____

I hereby declare that rights under contract or law have been conveyed to, and remain with, the nonprofit organization, with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 C.F.R. 1.9(d) or by any concern which would not qualify as a small business concern under 37 C.F.R. 1.9(d) or a nonprofit organization under 37 C.F.R. 1.9(e).

FULL NAME _____

ADDRESS _____

INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

()

FULL NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING

Peter E. Braveman, Esq.

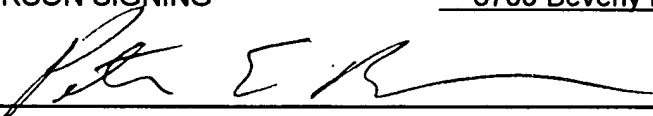
TITLE OF PERSON OTHER THAN OWNER

Senior Vice-President for Legal Affairs

ADDRESS OF PERSON SIGNING

8700 Beverly Boulevard, Los Angeles, CA 90048

SIGNATURE



DATE

5/6/01